

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective December 8, 2004

10/8/04, 247

**CLAIMS AS FILED - PART I**

(Column 1) (Column 2)

|                                  |  |              |                          |
|----------------------------------|--|--------------|--------------------------|
| TOTAL CLAIMS                     |  |              |                          |
| FOR                              |  | NUMBER FILED | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          |  | minus 20 =   | *                        |
| INDEPENDENT CLAIMS               |  | minus 3 =    | *                        |
| MULTIPLE DEPENDENT CLAIM PRESENT |  |              | <input type="checkbox"/> |

\* If the difference in column 1 is less than zero, enter "0" in column 2

*Amendt.  
3-24-05*

**CLAIMS AS AMENDED - PART II**

(Column 1) (Column 2) (Column 3)

| AMENDMENT A                                    |             | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA         |
|--|-------------|---|-------|---|--------------------------|
|  |             | Total                                     | Minus | ** 29                                       | =                        |
|  | Independent | * 5                                       | Minus | *** 5                                       | =                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |             |   |       |   | <input type="checkbox"/> |

SMALL ENTITY  
TYPE

OR OTHER THAN  
SMALL ENTITY

| RATE      | FEES   | RATE         | FEES   |
|-----------|--------|--------------|--------|
| BASIC FEE | 150.00 | OR BASIC FEE | 300.00 |
| X\$ 25=   |        | OR X\$50=    |        |
| X100=     |        | X200=        |        |
| +180=     |        | +360=        |        |
| TOTAL     |        | OR TOTAL     |        |

OTHER THAN  
SMALL ENTITY

| RATE                | ADDITIONAL<br>FEE | RATE                   | ADDITIONAL<br>FEE |
|---------------------|-------------------|------------------------|-------------------|
| X\$ 25=             |                   | OR X\$50=              |                   |
| X100=               |                   | X200=                  |                   |
| +180=               |                   | +360=                  |                   |
| TOTAL<br>ADDIT. FEE |                   | OR TOTAL<br>ADDIT. FEE |                   |

| AMENDMENT B                                    |             | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA         |
|--|-------------|---|-------|---|--------------------------|
|  |             | Total                                     | Minus | **  | =                        |
|  | Independent | * Minus                                   | Minus | ***   | =                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |             |   |       |   | <input type="checkbox"/> |

RATE  
ADDITIONAL  
FEE

| RATE                | ADDITIONAL<br>FEE | RATE                   | ADDITIONAL<br>FEE |
|---------------------|-------------------|------------------------|-------------------|
| X\$ 25=             |                   | OR X\$50=              |                   |
| X100=               |                   | X200=                  |                   |
| +180=               |                   | +360=                  |                   |
| TOTAL<br>ADDIT. FEE |                   | OR TOTAL<br>ADDIT. FEE |                   |

| AMENDMENT C                                    |             | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA         |
|--|-------------|---|-------|---|--------------------------|
|  |             | Total                                     | Minus | **  | =                        |
|  | Independent | * Minus                                   | Minus | ***   | =                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |             |   |       |   | <input type="checkbox"/> |

RATE  
ADDITIONAL  
FEE

| RATE    | ADDITIONAL<br>FEE | RATE      | ADDITIONAL<br>FEE |
|---------|-------------------|-----------|-------------------|
| X\$ 25= |                   | OR X\$50= |                   |
| X100=   |                   | X200=     |                   |
| +180=   |                   | +360=     |                   |